Effective October 1, 2003 /0 790290													
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY			OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			フ				F	RATE	FEE	1	RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA		8/	asic fee	385.00	OR	BASIC FEE	770.00	
TO	TAL CHARGE	ABLE CLAIMS	7 minus 20=		. /			XS 9=		OR	X\$18=		
iN!	DEPENDENT C	LAIMS	2 minus 3 =				Γ	X43=		OR	X86=		
MULTIPLE DEPENDENT CLAIM PRESENT								145=		OR	+290=		
* If the difference in column 1 is less than zero, enter "0" in column 2							7	OTAL	385	OR	TOTAL		
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)								MALL	ENTITY	OR	OTHER SMALL		
AMENDMENTA	8-14-06	CLAIMS REMAINING AFTER AMENDMENT	٠	HIGH NUME PREVIO PAID F	BER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	. 7.	Minus	-02	0_	-/	,	(\$ 9 =		OR	X\$18=		
	Independent	1.2	Minus	2	CI AIR			X43=		OR	X86=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								145=		OR	+290=		
							ADE	TOTAL SIT. FEE		OR	TOTAL ADDIT, FEE		
		(Column 1)		(Colum		(Column 3)			•				
AMENDMENT B	8/30/04	CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	USLÝ	PRESENT EXTRA	F	RATE .	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	• 9	Minus	-2	0	=	×	(\$ 9=		OR	X\$18=		
	Independent • 2		Minus	SENIDENT	3	-/	7	(43≖		OR	X86=		
	PINST PRESE	MINITON OF BIO			COAIM (,		1	145=		OR	+290=		
								TOTAL HT. FEE		O,R	TOTAL ADDIT. FEE		
		(Column 1)		(Colum	m 2)	(Column 3)			ζ.			, ,	
AMENDMENTC	•	CLAIMS REMAINING AFTER AMENDMENT	·	HIGHE NUMB PREVIOU PAID F	ER USLY	PRESENT EXTRA	R	ATE	ADDI: TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	•	Minus	*			×	\$ 9=		OŘ	X\$18=		
	Independent	•	Minus	***		=	×	43=			X86≈		
	FIRST PRESE	NTATION OF MU	LTIPLE DEP	ENDENT	CLAIM					OR			
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.												·	
	I the "Highest Nur I the "Highest Nu	mber Previously Pal mber Previously Pa mber Previously Pal mber Previously Pal	d For IN THIS	S SPACE IS	less that less that	20, enter "20." n 3, enter "3."	ADD	TOTAL IT. FEE			TOTAL LODIT. FEE JMM 1.		

Application or Docket Number